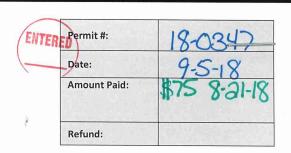
SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Layfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891

(715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN



Bayfield Co. Zoning Dept.



INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONS	STRUCTION UNTIL ALL PERMITS H	IAVE BEEN ISSUED TO APP	LICANT.					
TYPE OF PERMIT REQUESTED → LAND USE : SANITARY PRIVY CONDITIONAL USE SPECIAL USE B.O.A. OTHER								
Owner's Name:		Maili	ng Address:	City	/State/Zip:		Telephone	:
John	Ad Marian	Walnut 17	615 Big Ro	-L 20 1	Dask Lum	Little est 96	71569	2.2727
Address of Property	11 1 Track Toke T	City/S	State/Zip:	DE NO	O CO M BIXT	V MADA DII	Cell Phone	
77415 Bis	Rock Road	t	Jashbur	n W	54891		71529	123474
Contractor:		A 4 4		Plumber:	~ ~ · · · · ·		Plumber P	none:
· · · · · · · · · · · · · · · · · · ·	TRA		BO	Non			N/	A
Authorized Agent:	Person Signing Application on behal	f of Owner(s)) Agent	t Phone:	Agent Mailing Ad	dress (include City/St	ate/Zip):	Written At Attached	utĥorization
///	P		N/R		A			No :
PROJECT	Legal Description: (Use To	Tax II				Recorded Documer		
LOCATION	ECGAI DESCRIPTION. (OSC 1)	30	3972			554	9	68
SE 1/1	NE 1/4 Gov't	Lot Lot(s) CS	M Vol & Page	Lot(s) No	Block(s) No.	Subdivision:		Ŷ
LOSS W/2	W/2 V862 P.3	09	554 40	8				
Section 2	5 Township 49	N, Range W	Town of:	washb.		Lot Size	Acreage	
Section	, rownship	v, Kange vv		~> VW	MYN		30)
	☐ Is Property/Land within	a 300 feet of River Stre	am (incl Intermittent)	Distance Stru	cture is from Shore	line :		
	Creek or Landward side of		escontinue>		is Pro		operty in Are Wetlands Present?	
☐ Shoreland →	☐ Is Property/Land within	n 1000 feet of Lake. Por	nd or Flowage	Distance Stru			Yes	
			escontinue ->		iotare is nom snore		No XNo	
X Non-Shoreland								
_								
Value at Time				# of				Type of
of Completion	Project	# of Stories	Foundation	bedrooms		What Type of		Water
* include donated time &	Project	# Of Stories	roundation	in		r/Sanitary System the property?	m	on
material				structure	15 0	ii the property:		property
	☐ New Construction	1-Story	Basement	□ 1	☐ Municipal/Ci	ity		☐ City
s no	Addition/Alteration	1-Story + Loft	Foundation	2	(New) Sanitary Specify Type:			_ Well
4100	Conversion	☐ 2-Story	XSlab	□ 3	X Sanitary (Exi	sts) Specify Type:	HT],0
	☐ Relocate (existing bldg)				Privy (Pit) o	r 🗌 Vaulted (mi	n 200 gallon)
	☐ Run a Business on		Use	None	☐ Portable (w/s	service contract)		
Property		Year Round		☐ Compost Toilet				
					□ None			
Existing Structur	e: (if permit being applied fo	or is relevant to it)	Length: 3	21	Width: 24	l H	eight:	bet Karen
Proposed Constr		Length: 3	2'	Width: /2/ Height: 7/				
					- 12			
Proposed Us	se 🗸		Proposed Structu	ire		Dimensio	ns	Square Footage

Proposed Use	1	Proposed Structure		Dimensions		Square Footage
		Principal Structure (first structure on property)	(Х)	
		Residence (i.e. cabin, hunting shack, etc.)	(Х)	
		with Loft	(Х)	
💢 Residential Use	1	with a Porch	(Х)	
		with (2 nd) Porch	(Х)	
		with a Deck	(Х)	
		with (2 nd) Deck	(Х)	
☐ Commercial Use		with Attached Garage	(Х)	
		Bunkhouse w/ (\square sanitary, or \square sleeping quarters, or \square cooking & food prep facilities)	(Х)	
		Mobile Home (manufactured date)	(Х)	
□ N4ioial II.a.	X	Addition/Alteration (specify) 121 X32' Porch	(12' × 32	")	384
		Accessory Building (specify)	(Х)	
		Accessory Building Addition/Alteration (specify)	(Х)	
		Special Use: (explain)	(Х)	
		Conditional Use: (explain)	(Х)	
		Other: (explain)	(Х)	

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

(are) responsible for the detail and accuracy of all information I (we) am (are) providing in or with this application. I (we) am (are) providing in or with this application. I (we) am (are) providing in or with this application. I (we) consent to country officials charged with administering country ordinances to have access to the above described property at any reasonable interest or the purpose of inspection.

Owner(s):	de	L_			Date	8/2	1/1	15
(If there ar	re Multip	ole Owners	liste	d on the Deed All Owners must sign or letter(s) of authorization must accompany this application)			•	•

Authorized Agent: (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit John Warren 77615 Big Rock Washburn WI

Copy of Tax Statement
property send your Recorded Deed

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

Date

(1) Show Location of:

Proposed Construction

(2) Show / Indicate:

North (N) on Plot Plan

(3) Show Location of (*):

(*) **Driveway** \underline{and} (*) **Frontage Road** (Name Frontage Road)

(4) Show:

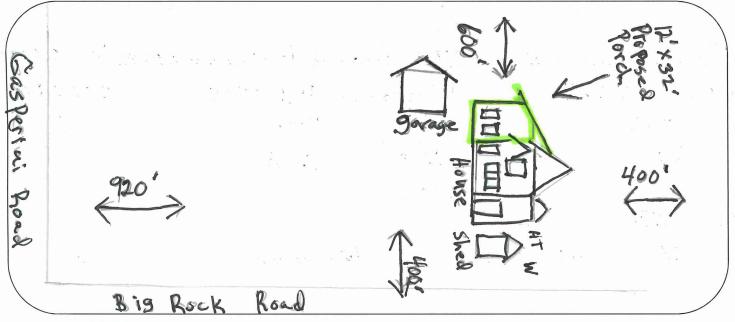
All Existing Structures on your Property

(5) Show:(6) Show any (*):

(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)

(7) Show any (*):

(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%



Please complete (1) - (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurement			Description	Measurement		
Setback from the Centerline of Platted Road	4600	Feet		Setback from the Lake (ordinary high-water mark)		Feet	
Setback from the Established Right-of-Way	Feet			Setback from the River, Stream, Creek	Feet		
				Setback from the Bank or Bluff		Feet	
Setback from the North Lot Line	400'	Feet			_		
Setback from the South Lot Line	9201	Feet		Setback from Wetland	564	Feet	
Setback from the West Lot Line	600	Feet		20% Slope Area on the property	☐ Yes	No	
Setback from the East Lot Line	4601	Feet		Elevation of Floodplain		Feet	
Setback to Septic Tank or Holding Tank	46,1	Feet		Setback to Well	60'	Feet	
Setback to Drain Field		Feet					
Setback to Privy (Portable, Composting)		Feet			ia .		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number: 42	15155	# of bedrooms:	Sanitary Date: 4/29/04				
Permit Denied (Date):	Reason for Denial:							
Permit #: 18-0347	Permit Date: 9-5-18							
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming □ Yes □ Yes □ Yes □ Yes □ Yes	ous Lot(s)) 🗗 No	Mitigation Required Mitigation Attached	☐ Yes → No ☐ Yes → No	Affidavit Required Affidavit Attached □ Yes ☑ No □ Yes ☑ No				
Granted by Variance (B.O.A.) ☐ Yes No Case #:		Previously Granted by Variance (B.O.A.) □ Yes Case #:						
Was Proposed Building Site Delineated Yes 🗆 No	Pre-existing		es Represented by Owner Was Property Surveyed	✓ Yes □ No □ Yes > No				
Inspection Record: Project is an addition of	to existing house	e. Project app	unis code	Zoning District (fl) Lakes Classification ()				
Date of Inspection: 9/4/18	Inspected by:	1 Norword		Date of Re-Inspection:				
Condition(s): Town, Committee or Board Conditions Attached? Yes No - (If No they need to be attached.) A Uniform Dwelling Code (UDC) permit must be obtained from the locally contracted UDC inspection agency prior to Stort of unstruction. Must meet and maintain Set-bocks.								
Signature of Inspector: wold Norward				Date of Approval: 9/4/18				
Hold For Sanitary: Hold For TBA:	Hold For Affic	davit: 🔲	Hold For Fees:					

village, State or Federal Nay Also Be Required

SANITARY - 425155 SIGN -SPECIAL -CONDITIONAL -BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

John & Marion Warren 18-0347 Issued To: No. W. Town of Washburn 49 N. Range **5** Location: SE ¼ of NE 1/4 Section 25 Township Less W 1/2 W 1/2 Subdivision CSM# Gov't Lot Block Lot

For: Residential Addition / Alteration: [1- Story; Porch (12' x 32') = 384 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): A UDC permit from the locally contracted UDC inspection agency must be obtained prior to the start of construction. Must meet and maintain setbacks.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not

completed or if any prohibitory conditions are violated.

Todd Norwood

Authorized Issuing Official

September 5, 2018

Date